

01-21-1999



100879309

RECORDATION FORM COVER SHEET
TRADEMARKS ONLY

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

Submission Type

- ☒ New
- ☐ Resubmission (Non-Recordation)
Document ID #
- ☐ Correction of PTO Error
Reel # Frame #
- ☐ Corrective Document
Reel # Frame #

Conveyance Type

- ☒ Assignment ☐ License
- ☐ Security Agreement ☐ Nunc Pro Tunc Assignment
- ☐ Merger
- ☐ Change of Name
- ☐ Other
- Effective Date
Month Day Year
10 01 98

Conveying Party

☐ Mark if additional names of conveying parties attached

Execution Date
Month Day Year

10 01 98

Name

Formerly

- ☐ Individual ☐ General Partnership ☐ Limited Partnership ☒ Corporation ☐ Association
- ☐ Other
- ☒ Citizenship/State of Incorporation/Organization

Receiving Party

☐ Mark if additional names of receiving parties attached

Name

DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)

City

State/Country

Zip Code

- ☐ Individual ☐ General Partnership ☐ Limited Partnership ☐ Association
- ☒ Corporation ☐ Association
- ☐ Other

☒ Citizenship/State of Incorporation/Organization

If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)

FOR OFFICE USE ONLY

Field

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0851-0027), Washington, D.C. 20503. See OMB Information Collection Budget Package 0851-0027, Patent and Trademark Assignment Practice. DO NOT SEND REQUESTS TO RECORD ASSIGNMENT DOCUMENTS TO THIS ADDRESS.

Mail documents to be recorded with required cover sheet(s) information to:
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

TRADEMARK
REEL: 1792 FRAME: 0369

Domestic Representative Name and Address

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Correspondent Name and Address

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

Pages

Enter the total number of pages of the attached conveyance document including any attachments.

#

Trademark Application Number(s) or Registration Number(s)

☐ Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Trademark Application Number(s)

<input type="text" value="75405293"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Registration Number(s)

<input type="text" value="1712244"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="1720648"/>	<input type="text"/>	<input type="text"/>
<input type="text" value="1657006"/>	<input type="text"/>	<input type="text"/>

Number of Properties

Enter the total number of properties involved.

#

Fee Amount

Fee Amount for Properties Listed (37 CFR 3.41):

\$

Method of Payment:

Enclosed ☒

Deposit Account ☐

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

#

Authorization to charge additional fees:

Yes ☐

No ☐

Statement and Signature

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.

Elisa P. Rosen

Name of Person Signing



Signature

10-9-98

Date Signed

ASSIGNMENT OF SERVICE MARKS

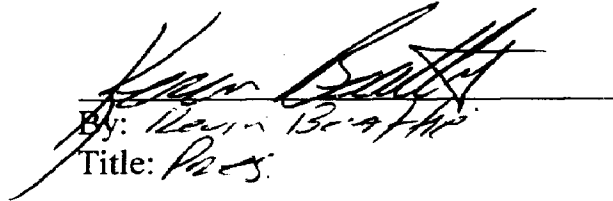
WHEREAS, Dent Wizard International Corporation, a Florida corporation, with its principal place of business at: 3003 South Hanley Road, St. Louis, Missouri 63143 ("Assignor"), has adopted, used and is using the marks listed on Exhibit A to this Assignment (the "Marks").

AND WHEREAS, DWI Acquisition Corporation, a Delaware corporation, with its principal place of business at: 3003 South Hanley Road, St. Louis, Missouri 63143 ("Assignee"), desires to acquire the Marks and any rights of Assignor in and to said Marks, including the registrations and applications for the Marks;

NOW, THEREFORE, for good and valuable consideration, the receipt of which is hereby acknowledged, Assignor does hereby assign to Assignee all of Assignor's right, title, and interest in and to the Marks and the goodwill of the business symbolized by the Marks.

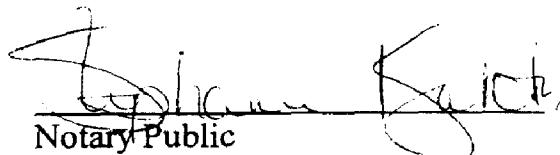
Signed this 1st day of October, 1998.

Dent Wizard International Corporation


By: Kevin B. Smith
Title: Pres.

STATE OF Georgia)
)
COUNTY OF DeKalb) SS:

Subscribed and sworn to before me
this 1st day of October, 1998.


Notary Public

MY COMMISSION EXPIRES JUNE 4, 2002

My Commission Expires: _____

EXHIBIT A

U.S. Registrations

<u>Mark</u>	<u>Registration No.</u>	<u>Registration Date</u>
THE DENT WIZARD and DESIGN	1,712,244	9/1/92
THE DENT WIZARD and DESIGN	1,720,648	9/29/92
DENT WIZARD and DESIGN	1,657,006	9/10/91

U.S. Application

<u>Mark</u>	<u>Serial No.</u>	<u>Filing Date</u>
DENT WIZARD	75/405,293	12/15/97

Canadian Registration

<u>Mark</u>	<u>Registration No.</u>	<u>Registration Date</u>
DENT WIZARD	TMA402,037	8/28/92